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**INDIANA COMMISSION ON PROPRIETARY EDUCATION***Board of Commissioners Meeting Memorandum*

**Date:** March 4, 2007

**From:** Rebecca Carter, Director of Regulatory Compliance

**Subject: INDIANA DABNEY UNIVERSITY  
NEW DEGREE APPLICATION – MASTER’S DEGREE**

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**Staff Recommendation**

The commission staff recommends that Indiana Dabney University be granted the authority to award the Master of Science degree in the following program:

**Nursing**

**Background Information**

Indiana Dabney University has regulated by the Indiana Commission on Proprietary Education since February 25, 2004. The school was granted Fully Accredited status by the Commission November 3, 2004. The Board of Commission granted this institution the authority to award the Associate of Science in Nursing in April of 2006.

The Master of Science degree in Nursing consists of 49 quarter-credit hours of training.

Corey Dabney for this Commission an e-mail correspondence that he received from Mervin R. Helmuth, Chairman of the Indiana Nursing Board, stating that all the Board required of Mr. Dabney is that he inform that the institution has "...such a program." Mr. Helmuth further stated in his email that Indiana Dabney University would likely "...need to have NCATE approval and many students would also want the institution to have either NLN accreditation or CCNE accreditation or their credits would not be readily accepted at any other institution.

At this time, Indiana Dabney University is not accredited by any U.S. Department of Education recognized accrediting Body. Mr. Dabney states in his email to me that his institution is going to apply for accreditation with the Accrediting Commission of Career and Schools and Colleges of Technology (ACCSCT).

**Supportive Documentation**

1. Degree Application
2. Instructor Qualification Record Forms
3. Copy of Email from Nursing Board

**INDIANA COMMISSION ON  
PROPRIETARY EDUCATION**

**DEGREE APPLICATION**  
(New or Renewal program)

*Use the <tab> key to advance to the next field, or select a field by clicking the cursor.*

Name of Institution Indiana Dabney University

Name of Program Master of Nursing Degree (FNP-Nurse Practitioner)

Level of Degree (AAS, AS, AA, BAS, BA, BS, MBA, MAS, MA, MS, Ph.D.) \_\_\_\_\_

Name of Person Preparing this Form Corey Dabney

Telephone Number (219) 791-1111 Application Type

Date the Form was Prepared 2/12/2007 ☒ New ☐ Renewal

**I. PROGRAM OBJECTIVES: Describe what the program is designed to achieve and explain how it is structured in order to accomplish the objectives.**

The Indiana Dabney University - School of Nursing program's purpose is to advocate high quality healthcare by preparing nursing students for initial licensure as registered nurses and to prepare advanced nursing skill training to graduate level students, as well as mentor those enrolled in the completion program to develop skills that contribute to and promote the standards and ethics of the nursing profession. Indiana Dabney University's education process fosters the level of healthcare that respects the health care environment. The out come will be that graduates will become responsible and accountable members of the nursing profession by promoting, influencing, monitoring, and participating in the health development of the community and society. Through nursing research, education, and practice, students and faculty seek to enhance the quality of life for people of all cultures, economic levels, and geographic locations. The philosophy of the School of Nursing is consistent with the purpose and mission of the Indiana Dabney University to prepare the community, state, nation workers and leaders.

This master's degree program provides licensed registered nurses with the opportunity to receive advanced training in the field of nursing. Through this effort, we hope to address the critical need for masters prepared nurses in academia and within the healthcare setting.

**II. PROGRAM STRUCTURE:** List all courses in the program. Indicate course name, number, and number of credit hours or clock hours for each course.

NAME OF PROGRAM: Master of Nursing Degree (NP-Nurse Practitioner)

TOTAL COURSE HOURS: 49 Check one: **Quarter Hours** ☐  
 \_\_\_\_\_ Semester Hours ☒  
 \_\_\_\_\_ Clock Hours ☐

LENGTH OF PROGRAM: 23 months TUITION: \$21,707.00

**SPECIALTY COURSES:**

<u>Course Number</u>	<u>Course Title</u>	<u>Course Hours</u>
NUR 501	Nursing – Theoretical Constructs	4
NUR 502	Nursing – Strategies for Nursing and Healthcare	4
NUR 506	Nursing – Nursing Research	3
NUR 510	Nursing – Community to Global Nursing (Sociocultural Influences)	4
NUR 599	Nursing – Nursing Capstone Scholarly Project	4
NUR 503	Nursing – Pharmacotherapeutics in Primary Care	3
NUR 505	Nursing – Advanced Primary Care Nursing of Chronic Illness in Children and Adults – 3	3
NUR 507	Nursing – Advanced Health Assessment	3
NUR 504	Nursing – Pathopharmacology I	3
NUR 508	Nursing – Pathopharmacology II	3
NUR 509	Nursing – Adult Health Practice-Critical Illness	3
NUR 512	Nursing – Adult Health Preceptorship-Critical Illness	3
NUR 511	Nursing – Chronic Illness and Commonly Recurring Conditions-Adult Community Health Practice	3
NUR 513	Nursing – Chronic Illness and Commonly Recurring Conditions-Adult Health Mentoring	3
NUR 516	Nursing – Health Promotion for Advanced Nursing Practice/Special Populations	3
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**SPECIALTY COURSES:**

<u>Course Number</u>	<u>Course Title</u>	<u>Course Hours</u>

**GENERAL EDUCATION / LIBERAL ARTS COURSES:**

<u>Course Number</u>	<u>Course Title</u>	<u>Course Hours</u>

Number of Credit/Clock Hrs. in Specialty: 49 / 720 Percentage: 100%  
Number of Credit/Clock Hrs. in General Courses:            /            Percentage:           

If applicable:

Number of Credit/Clock Hrs. in Liberal Arts:            /            Percentage:

**III. LIBRARY:** Please provide information pertaining to the library located in your institution.

**1. Location of library; Hours of student access; Part-time, full-time librarian/staff:**

Our students have full access to the medical libraries at Methodist Hospital Northlake and Southlake. Our students can also use the library resources at Indiana University Northwest along with the resources listed below.

Below is a list of public libraries our student's have access to for professional materials and periodicals.

Crown Point Community Library

214 S. Court St. (1/2 block south of the Courthouse Square)

Crown Point, IN 46307

Phone: 219-663-0270 Fax: 219-663-0403

Hours: Monday, Tuesday, Thursday 9-8, Wednesday and Friday 9-5, Saturday 9-5.

Winfield Library

10645 Randolph St. (in the Winfield Township Building)

Crown Point, IN 46307

Phone: 219-662-4039 Fax: 219-662-4068

Hours: Monday 10-6, Wednesday 10-5, Tuesday and Thursday 10-8, Friday 9-5, Saturday 10-2.

East Chicago Public Library's

Locations and Hours

Primary Locations      Hours

Main Library

2401 E. Columbus Drive

East Chicago, IN 46312

Voice: 219/397-2453

Fax: 219/397-6715      Robert A. Pastrick Branch Library

1008 W. Chicago Avenue

East Chicago, IN 46312

Voice: 219/397-5505

Fax: 219/398-2827      Monday through Thursday

9 a.m. to 8 p.m.

Friday and Saturday

9 a.m. to 5:30 p.m.

Sundays

1 p.m. to 5 p.m.

(During the school year)

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Reading Room Locations - Hours: 9 a.m. to 5 p.m. Monday through Friday

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Roberto Clemente Center

3616 Elm Street

East Chicago, IN 46312

219/397-4065

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Heritage Hall

4506 Tod Avenue

East Chicago, IN 46312

219/397-5773

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M.L. King Center

4802 Melville Avenue

East Chicago, IN 46312

219/397-4092

Bessie Owens Center

4001 Alexander Avenue

East Chicago, IN 46312

219/397-4039

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Penn Center

3550 Pennsylvania Avenue

East Chicago, IN 46312

219/397-4014

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151st Street Center

4925 Gladiola Avenue

East Chicago, IN 46312

219/397-3241

St. Catherine Hospital

4321 Fir Street

East Chicago, IN 46312

219/392-7183

Lake County Public Library

1919 West 81st Avenue • Merrillville, Indiana 46410-5382 • Phone: 219.769.3541 • Fax:  
219.756.9358

220 W. 5th Avenue

Phone: (219) 886-2484 Fax: (219) 886-6829

Hours:

Monday-Thursday noon-8 Friday & Saturday 10am-5pm

4030 W. 5th Avenue

Phone: (219) 944-9402 Fax: (219) 944-9644

Hours:

Monday-Thursday noon-8 Friday & Saturday 10am-5pm

1835 Broadway

Phone: (219) 886-9120 Fax: (219) 886-9319

Hours:

Monday-Thursday noon-8pm Friday & Saturday 10am-5pm

3953 Broadway

Phone: (219) 887-8112 Fax: (219) 887-5967

Hours:

Monday-Thursday noon-8pm Friday & Saturday 10am-5pm

1113 Taft St.

Phone: (219) 944-2795 Fax: (219) 944-9255

Hours:

Monday-Thursday noon-8 Friday & Saturday 10am-5pm

501 S. Lake St.

Phone: (219) 938-3941 Fax: (219) 938-8759

Hours:

Monday-Thursday noon-8pm Friday & Saturday 10am-5pm.

Central Library

1919 W. 81st Ave.

Merrillville, IN 46410-5382

(219) 769-3541

Map and directions

- Monday - Thursday 9 a.m. to 9 p.m.
- Friday 9 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

Black Oak Branch

5921 W. 25th Ave.

Gary, IN 46406-3024

(219) 844-8809

Map and directions

- Tuesday 10:00 a.m. to 6 p.m.
- Thursday 10:00 a.m. to 6 p.m.
- Saturday 9:00 a.m. to 5 p.m.

Cedar Lake Branch

13330 Parrish St.

Cedar Lake, IN 46303-9201

(219) 374-7121

Map and directions

- Monday 12:30 p.m. to 8:30 p.m.
- Tuesday 10 a.m. to 6 p.m.
- Wednesday 12:30 p.m. to 8:30 p.m.
- Thursday 10 a.m. to 6 p.m.
- Friday 10 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

Dyer-Schererville Branch

1001 W. Lincoln Hwy.

Schererville, IN 46375-1552

(219) 322-4731

Map and directions

- Monday - Thursday 10 a.m. to 8:30 p.m.



- Friday 10 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

Forty-First Avenue Branch

3491 W. 41st Ave.

Gary, IN 46408-3007

(219) 980-5180

Map and directions

- Monday 12:30 p.m. to 8:30 p.m.
- Wednesday 12:30 p.m. to 8:30 p.m.
- Friday 10 a.m. to 6 p.m.

Griffith Branch

940 N. Broad St.

Griffith, IN 46319-1528

(219) 838-2825

Map and directions

- Monday - Thursday 10 a.m. to 8:30 p.m.
- Friday 10 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

Highland Branch

2841 Jewett St.

Highland, IN 46322-1617

(219) 838-2394

Map and directions

- Monday - Thursday 10 a.m. to 8:30 p.m.
- Friday 10 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

Hobart Branch

100 N. Main St.

Hobart, IN 46342-4391

(219) 942-2243

Map and directions

- Monday - Thursday 10 a.m. to 8:30 p.m.
- Friday 10 a.m. to 6 p.m.

- Saturday 9 a.m. to 5 p.m.

Lake Station Branch

2400 Central Ave.

Lake Station, IN 46405-2122

(219) 962-2409

Map and directions

- Monday 12:30 p.m. to 8:30 p.m.
- Wednesday 12:30 p.m. to 8:30 p.m.
- Friday 10 a.m. to 6 p.m.

Munster Branch

8701 Calumet Ave.

Munster, IN 46321-2526

(219) 836-8450

Map and directions

- Monday - Thursday 10 a.m. to 8:30 p.m.
- Friday 10 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

New Chicago Branch

3250 Michigan Ave.

New Chicago, IN 46342-1172

(219) 962-2421

Map and directions

- Tuesday 10 a.m. to 6 p.m.
- Thursday 12:30 p.m. to 8:30 p.m.
- Saturday 9 a.m. to 5 p.m.

St. John Branch

9450 Wicker Ave.

St. John, IN 46373-9400

(219) 365-5379

Map and directions

- Monday 12:30 p.m. to 8:30 p.m.
- Tuesday 10 a.m. to 6 p.m.
- Wednesday 12:30 a.m. to 8:30 p.m.

- Thursday 10 a.m. to 6 p.m.
- Friday 10 a.m. to 6 p.m.
- Saturday 9 a.m. to 5 p.m.

**2. Number of volumes of professional material:**

In excess of 40 thousand available

50 volumes owned and on-campus of Indiana Dabney University

**3. Number of professional periodicals subscribed to:**

In excess of 40 thousand

None owned by Indiana Dabney University

**4. Other library facilities in close geographical proximity for student access:**

All listed in in section 1 above.

**If you have any questions pertaining to the required standards for degree granting approval, please refer to 570 IAC 10.**

Doc.: degreappform.doc

**IV. FACULTY:** Attach completed Instructor's Qualification Record for each instructor.  
**\*\* Include all required documentation pertaining to the qualifications of each instructor.**

**Total # of Faculty in the Program:** 5 **Full-time:** 5 **Part-time:** 0

**Fill out form below: (PLEASE LIST NAMES IN ALPHABETICAL ORDER.)**

List Faculty Names (Alphabetical Order)	Degree or Diploma Earned	# Years of Working Experience in Specialty	# Years Teaching at Your School	# Years Teaching at Other	Check one:	
					Full- time	Part- time
Farley, Johnna MD	Medical	2 years	2 years	2 years	#	
Kalamaras, Valerie FNP	Practitioner	10 years	2 years	9 years	#	
Royal, Valerie, FNP	Practitioner	8 years	2 years	5 years	#	
Sturges, Karen RN, MBA,,M.Ed	Nursing	31 years	2 years	17 years	#	
Walker, Roland MD	Medical	6 years	2 years	1 year	#	

## INSTRUCTOR'S QUALIFICATION RECORD

***Please TYPE the form.***

## INSTRUCTOR'S QUALIFICATION RECORD

***Please TYPE the form.***

NAME OF INSTITUTION: Indiana Dabney University

## Chronic Illness and Commonly Recurring Conditions-Adult Community Health Practice

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## INSTRUCTOR'S QUALIFICATION RECORD

***Please TYPE the form.***

<b>NAME:</b>	Kalamaras, FNP	Valerie	
	<b>(Last)</b>	<b>(First)</b>	<b>(Middle)</b>

NAME OF INSTITUTION: Indiana Dabney University

Theoretical Constructs, Strategies for Nursing and Healthcare, Nursing Research,
Community to Global Nursing (Sociocultural Influences), Nursing Capstone Scholarly Project,
Pharmacotherapeutics in Primary Care, Advanced Health Assessment,
Advanced Primary Care Nursing of Chronic Illness in Children and Adults,
Pathopharmacology I, Pathopharmacology II, Adult Health Practice-Critical Illness,
Adult Health Preceptorship-Critical Illness,
Chronic Illness and Commonly Recurring Conditions-Adult Community Health Practice,
Chronic Illness and Commonly Recurring Conditions-Adult Health Mentoring,
Health Promotion for Advanced Nursing Practice/Special Populations

Source of Training/Education	Location	Area or Subject of Training/Education	Period of Attendance	
			From:	To:
Valparaiso University	Valparaiso, IN	Master of Nursing	1993	1995
Applicable Experience	Location	Exact Nature of Experience	Employment Period	
			From:	To:
Clinical Service Manager	Hammond Clinic	Nursing Managed Care	2004	2005
Nursing Director	Lake County Sheriff Medical	Nurse Practitioner	2005	present

## INSTRUCTOR'S QUALIFICATION RECORD

***Please TYPE the form.***

NAME OF INSTITUTION: Indiana Dabney University

Theoretical Constructs, Strategies for Nursing and Healthcare, Nursing Research,
Community to Global Nursing (Sociocultural Influences), Nursing Capstone Scholarly Project,
Pharmacotherapeutics in Primary Care, Advanced Health Assessment,
Advanced Primary Care Nursing of Chronic Illness in Children and Adults,
Pathopharmacology I, Pathopharmacology II, Adult Health Practice-Critical Illness,
Adult Health Preceptorship-Critical Illness,
Chronic Illness and Commonly Recurring Conditions-Adult Community Health Practice,
Chronic Illness and Commonly Recurring Conditions-Adult Health Mentoring,
Health Promotion for Advanced Nursing Practice/Special Populations

Source of Training/Education	Location	Area or Subject of Training/Education	Period of Attendance	
			From:	To:
Indiana University Northwest	Gary, IN	BSN-Nursing	1990	1997
Valparaiso University	Valparaiso, IN	Master of Nursing	1998	2003
Applicable Experience	Location	Exact Nature of Experience	Employment Period	
			From:	To:
Nurse Practitioner	Gary Community Health	Family Nurse Practitioner	2003	present



## INSTRUCTOR'S QUALIFICATION RECORD

***Please TYPE the form.***

**NAME:** Sturges, RN, MBA, M.Ed Karen  
**(Last) (First) (Middle)**

NAME OF INSTITUTION: Indiana Dabney University

Theoretical Constructs, Strategies for Nursing and Healthcare, Nursing Research,
Community to Global Nursing (Sociocultural Influences), Nursing Capstone Scholarly Project,
Pharmacotherapeutics in Primary Care, Advanced Health Assessment,
Advanced Primary Care Nursing of Chronic Illness in Children and Adults,
Pathopharmacology I, Pathopharmacology II, Adult Health Practice-Critical Illness,
Adult Health Preceptorship-Critical Illness,
Chronic Illness and Commonly Recurring Conditions-Adult Community Health Practice,
Chronic Illness and Commonly Recurring Conditions-Adult Health Mentoring,
Health Promotion for Advanced Nursing Practice/Special Populations

Source of Training/Education	Location	Area or Subject of Training/Education	Period of Attendance	
			From:	To:
University of Illinois	Urbana-Champaign	Masters in Education	1997	1986
Augustana School of Nursing	Chicago, IL	Diploma Nursing	1974	1976
University of Phoenix	Schaumburg, IL	Master of Business	2003	2005
Applicable Experience	Location	Exact Nature of Experience	Employment Period	
			From:	To:
Kindred Hospital	Chicago, IL	Education Director	1997	2005
Mount Sinai Hospital	Chicago, IL	Education and Quality Director	1995	1997

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